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21917 7590 06/02/2005

MCHALE & SLAVIN, P.A.  
2855 PGA BLVD  
PALM BEACH GARDENS, FL 33410  
09/07/2005 LWONDIM2 00000017 10695627

01 FC:2501	700.00 DP
02 FC:1504	300.00 DP
03 FC:8001	30.00 DP



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**Certificate of Mailing or Transmission**  
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Debra N. Gerstemeier	(Depositor's name)
(Signature)	
9-2-2005	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/695,627	10/27/2003	Thomas D. Wolfe	1978.009	3902

TITLE OF INVENTION: METHOD FOR REMOTE MONITORING OF WATER TREATMENT SYSTEMS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	09/02/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
VO, HIEN XUAN	2863	702-022000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	McHale & Slavin, P.A.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	2 _____	2 _____
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	3 _____	3 _____

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Watereye, Inc.

Grass Valley, California

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

Issue Fee  
 Publication Fee (No small entity discount permitted)  
 Advance Order - # of Copies 10

A check in the amount of the fee(s) is enclosed.  
 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number \_\_\_\_\_ (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature \_\_\_\_\_

Date

9/2/05

Typed or printed name

Michael A. Slavin

Registration No.

34,016

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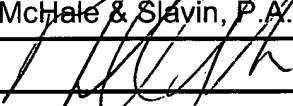
**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

(to be used for all correspondence after initial filing)	Application Number	10/695,627	
	Filing Date	10/27/2003	
	First Named Inventor	Thomas D. Wolfe	
	Art Unit	2863	
	Examiner Name	Hien Xuan Vo	
Total Number of Pages in This Submission	5	Attorney Docket Number	1978.009

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> : Landscape Table on CD	<input checked="" type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	McHale & Slavin, P.A.		
Signature			
Printed name	Michael A. Slavin		
Date	9/2/05	Reg. No.	34,016

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Debra N. Gerstemeier	Date	9-2-2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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# FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1030.00)

**Complete if Known**

Application Number	10/695,627
Filing Date	10/27/2003
First Named Inventor	Thomas D. Wolfe
Examiner Name	Hien Xuan Vo
Art Unit	2863
Attorney Docket No.	1978.009

**METHOD OF PAYMENT (check all that apply)**
 Check  Credit card  Money Order  Other  None

 Deposit Account:

Deposit Account Number	
Deposit Account Name	

**The Director is authorized to: (check all that apply)**

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**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity	Fee Code (\$)	Fee	Small Entity	Fee Code (\$)	Fee	Fee Description	Fee Paid
1001	790	2001	395			Utility filing fee	
1002	350	2002	175			Design filing fee	
1003	550	2003	275			Plant filing fee	
1004	790	2004	395			Reissue filing fee	
1005	200	2005	100			Provisional filing fee	
<b>SUBTOTAL (1) (\$)</b>							

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	Extra Claims	Fee from below	Fee Paid
	-20** =		
Independent Claims		X	
Multiple Dependent	- 3** =		

Large Entity	Fee Code (\$)	Fee	Small Entity	Fee Code (\$)	Fee	Fee Description	Fee Paid
1202	50	2202	25			Claims in excess of 20	
1201	200	2201	100			Independent claims in excess of 3	
1203	360	2203	180			Multiple dependent claim, if not paid	
1204	200	2204	100			** Reissue independent claims over original patent	
1205	50	2205	25			** Reissue claims in excess of 20 and over original patent	
<b>SUBTOTAL (2) (\$)</b>							

\*\*or number previously paid, if greater; For Reissues, see above

**3. ADDITIONAL FEES**

Large Entity	Fee Code (\$)	Fee	Small Entity	Fee Code (\$)	Fee	Fee Description	Fee Paid
1051	130	2051	65			Surcharge - late filing fee or oath	
1052	50	2052	25			Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130			Non-English specification	
1812	2,520	1812	2,520			For filing a request for ex parte reexamination	
1804	920*	1804	920*			Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*			Requesting publication of SIR after Examiner action	
1251	120	2251	60			Extension for reply within first month	
1252	450	2252	225			Extension for reply within second month	
1253	1,020	2253	510			Extension for reply within third month	
1254	1,590	2254	795			Extension for reply within fourth month	
1255	2,160	2255	1,080			Extension for reply within fifth month	
1401	500	2401	250			Notice of Appeal	
1402	500	2402	250			Filing a brief in support of an appeal	
1403	1,000	2403	500			Request for oral hearing	
1451	1,510	1451	1,510			Petition to institute a public use proceeding	
1452	500	2452	250			Petition to revive - unavoidable	
1453	1,500	2453	750			Petition to revive - unintentional	
1501	1,400	2501	700			Utility issue fee (or reissue)	
1502	800	2502	400			Design issue fee	1000.00
1503	1,100	2503	550			Plant issue fee	
1460	130	1460	130			Petitions to the Commissioner	
1807	50	1807	50			Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180			Submission of Information Disclosure Stmt	
8021	40	8021	40			Recording each patent assignment per property (times number of properties)	
1809	790	2809	395			Filing a submission after final rejection (37 CFR 1.129(a))	
1810	790	2810	395			For each additional invention to be examined (37 CFR 1.129(b))	
1801	790	2801	395			Request for Continued Examination (RCE)	
1802	900	1802	900			Request for expedited examination of a design application	
Other fee (specify)						Advance Order-(10) copies of patent	30.00
<b>SUBTOTAL (3) (\$)</b>							

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3) (\$)** 1030.00

(Complete if applicable)

Name (Print/Type)	Michael A. Slayton	Registration No. (Attorney/Agent)	34,016	Telephone	(561) 625-6575
Signature	Date 9/2/05				

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